

Status of Home and Community Care Block Grant Services for Older Adults

April 2014

To meet requests of federal and state officials, the Senior Tar Heel Legislature, our partners, and stakeholders, the North Carolina Division of Aging and Adult Services (DAAS) has surveyed the statewide network of Home and Community Care Block Grant (HCCBG) providers to assess service needs and learn about issues facing the service delivery system. DAAS has surveyed the network six times since February 2009, most recently in March 2014. Of the 315 local HCCBG providers contacted, 254 responded (81%). Of important note, all data reported in this document is a onetime snapshot from the 2014 HCCBG survey. This report does not reflect the fluidity of data since the surveys completion such as frequent changes in the waiting list.

About the Home and Community Care Block Grant

Established in 1992 under NCGS 143B-181.1(a)(11), the HCCBG was devised to provide a “common funding stream” for a comprehensive and coordinated system of home and community-based services and opportunities for older adults. HCCBG services are available to people age 60 and older, although the “average” client is nearly 80 and the program targets individuals who are socially and economically needy.

HCCBG is administered through the NC Division of Aging and Adult Services and the 16 Area Agencies on Aging. It combines federal and state funds with a local match, and it gives county commissioners discretion in budgeting and administering funds.

Results

The results of the survey continue to suggest the negative effect of stagnant, and in some cases, diminished funding, given the increasing demand for HCCBG services. The survey further reflects the difficulty providers have continued to face as a result of the federal sequester and otherwise flat funding. The 2nd round of sequestration took place about four months before this survey was administered.

“We have frozen the number of clients to a maximum level that can be served during the fiscal year. Only when a client comes off the program can we [add] someone from the waiting list.” [Home-delivered meals provider]

“We try but the waiting list numbers continue to grow and the clients being served many times require more not less service hours over the course of the year to remain safely at home.” [In-home service provider]

“We are currently providing frozen meal delivery as of this budget year. We made the change to save money in the previous budget.” [Home-delivered meals provider]

“[The] need for urgent housing repairs will continue to increase as housing ages and the population ages. [Housing/Home repair provider]

“If more funds are sequestered, we may need to further reduce programs available at the four locations. If enough funds are sequestered, we could be forced to eliminate one of the locations.” [Senior Center provider]

HCCBG Services at a Glance

- adult day care and day health care
- respite
- information & assistance
- congregate and home-delivered meals
- senior centers
- housing and home repair
- health promotion and disease prevention
- care management
- in-home aide services
- general and medical transportation
- senior companion
- health screenings
- skilled home health

Other funding sources and volunteer resources targeted to older adults are shrinking

Although there is some improvement since last year, one-fifth (20%) of agencies that receive county funds are still reporting reduction or elimination of this support (down from 57% in 2013); 11% say the same about municipal funds, as do 18% of those looking to United Way. Significantly, 43% of the agencies report that consumer contributions, as well as private and corporate donations have decreased or stopped providing funding altogether. Almost half of the organizations who are using volunteers report a shrinking number (42%) and reduced hours (39%) up from last year.

“Foundations have changed their focus. We have lost over \$50,000 in grant funding this fiscal year.”

“The United Way did not meet their campaign goal; therefore, all providers will be cut 4%. The city is cutting our allocation in half for next fiscal year, then will eliminate our funding for next fiscal year due to their budget issues.”

“The county lead agency elected to cut Senior [Center] Operations funding in the past budget year.”

Service Needs and Wait Lists Remain High but Stagnant

Essentially the wait list has remained the same as reported last year suggesting a high level of unmet need and possibly a reluctance to add to the wait list given an inability to serve more persons. About 7,400 seniors are waiting for home and community services through HCCBG providers, when projecting responses to 100% the number is approximately 16,000.

77% of Information and Assistance (I&A) providers report **increased requests for their services (up from 71% last year)**, while **40%** say that **community resources to which clients can be referred have decreased**.

80% of senior centers report **increased demand** for their programs and services; 11% of centers report that other providers who make HCCBG services available at the center are reducing or ending this center connection (no change from last year).

"All service providers need additional funding to meet the needs of the growing senior adult population."

Over Half Needing Services Wait for In-Home Aide or Home-Delivered Meals

Of those 16,000 projected to be in need of services, **60% are waiting for an in-home aide or home-delivered meal**. In-home aide services—providing help with basic personal care and homemaker tasks—continue to have the most people waiting for services, with a projected number 5,936 on the list. In response, 71% of providers are prioritizing applicants; 53% are reassessing clients to reduce or end services; 40% are capping the amount of service that can be used; 30% are reducing the number of service hours they provide; and 17% are still not adding new clients from the wait list when an existing client no longer requires the service.

Home-delivered meals (HDM) remains the service with the second highest wait list—at a projected number of 3,583, or 22%. 60% of HDM providers are prioritizing applicants according to need; and 19% are still not adding a new client when a participant no longer requires the service.

"We are unable to increase staff to meet the higher volume of services needed."

"The problem is with finding volunteers to use, especially to deliver meals."

General Transportation has the third longest wait list with approximately 1,912 people or 12% currently waiting for the service. There were unmet service needs for other areas as well: **housing and home improvement report** (1,392 waiting), **medical transportation** (1,269 waiting) – up substantially from last year, and **congregate nutrition** (794 waiting). These wait lists and service reductions can have significant consequences to those who are unable to access the service they require.

Providers Continue to Seek Help with Wait Lists

Providers continue to ask for more help from families and volunteers; increase their marketing, fundraising, and partnerships; and expand use of technology to assure efficient service delivery.

"We continually are seeking out new and innovative fundraising opportunities."

"A local Church volunteered to prepare and deliver meals to approximately 15 - 20 people living in their surrounding area. Another Church volunteered to serve as a drop site for HDM and provides all volunteers for the delivery of up to 20 meals per day."

"We have a good volunteer base. We try to place our volunteers close to sites so they don't have to do as much driving."

. . . and to Be Efficient and Proactive

"We routinely search and submit proposals for various grant opportunities."

"We continue to assess services needs and make adjustments in order to try to serve as many consumers as possible with funds that are available."

"We have donation boxes as you walk in. Some Senior Centers have a nonprofit group called Friends of the Senior Center who run a gift shop. All proceeds go to Senior Center."

